## TAXPAYER PETITION TO THE CLARK COUNTY BOARD OF EQUALIZATION

FILING INSTRUCTIONS:	
ONE ORIGINAL AND ONE DUPLICATE, SIGNED, SET OF DOCUMENTS TO: CLARK COUNTY BOARD OF EQUALIZATION	ACCOUNT NO:
500 WEST EIGHTH STREET, SUITE 19	
<u>P O BOX 5000</u> VANCOUVER WA 98666 5000	Office Use Only:
<u>VANCOU VER WA 98000 3000</u> TELEPHONE: (360) 397-2337 – FAX: (360) 397-6162	PETITION NO: DATE RECEIVED:
	DATE RECEIVED:
Petition must be received or postmarked no later than July 1 of the current assessment year (2009) or 60 days after the date of <u>MAILING</u> OF THE CHANGE OF VALUE (OR OTHER DETERMINATION NOTICE) by the Clark County Assessor, whichever comes later. <u>A COPY OF THE CHANGE OF VALUE NOTICE MUST BE ATTACHED IF FILING AFTER JULY 1, 2009</u> (RCW 84.40.038)	
	RMF#NH #SATS
<u> </u>	ange the valuation of the property described below as shown 2010 to the amount shown in Item No. 3(b) on this form.
ALL ITEMS MUST BE C	OMPLETED (Please Print)
forms for each parcel under appeal unless you are appealing multiple parcel	letermination notice and your tax statement. Submit separate petition arcels of similar property, such as a condominium complex or implify your filing. Parcels under the Open Space Taxation Act will file
2. Owner on Record:	
Mailing Address For All Correspondence Relating to Appeal:	
Name of Taxpayer or Agent & Agency	
Street Address:	
City, State, Zip Code:	
Daytime Phone No: [ ] FAX	e-mail:
3. (a) Assessor's determination of Appraised Value:	(b) Taxpayer estimate of Appraised Value:
Land \$	Land\$
Improvements/Bldgs \$	Improvements/Bldgs \$
TOTAL (2009) \$	TOTAL (2009) \$
I request the information used by the assessor in valuin	g my property. [ ]
Assessor's "Change of Value Notice" or other determina	tion notice was MAILED:
4. Specific reasons why you believe the appraised valuation does	
The appreciated value of other properties, the percentage of	f assessment increase, personal hardship, the amount of tax, and
other matters unrelated to the market value cannot, by lav	
Tralia matition company in the state of the	
If this petition concerns income property, you must attach a statem leases or rental agreements.	ent of income and expenses for the past two years and copies of
icases of tental agreements.	

5. General Description of property:

		_
	a. Address/locationCity	
	b. Lot size (acres):	
	c. Zoning or permitted use:	
	d. Description of building:e. View? [] Yes [] No f. Waterfront? [] Yes [] No	
		_
6.	The property which is the subject of this petition is (check all which apply):	
	[ ] Residential Land [ ] Residential Building	
	[ ] Commercial Land [ ] Commercial Building [ ] Multi-family #Units	
	[ ] Industrial Land [ ] Industrial Building	
	[ ] Open Space/Current Use Land [ ] Mobile Home	
	[ ] Classified/Designated Forest Land [ ] Other	
7.	Purchase price of property: \$ (If purchased within last 5 years-Attach copy of Financial Document)	
	Date of Purchase:	
	Remodeled or improved since purchase? [ ] Yes [ ] No Cost \$	
	Has the property been appraised by other than the County Assessor? [ ] Yes [ ] No	
	If yes, appraisal date:By whom?(Attach copy if w/in 5 years)	
	Appraised value: \$Purpose of Appraisal:	
<u></u>		
Cn	eck the following statements that apply:	
8. [	] I intend to submit <u>additional</u> documentary evidence to the Board of Equalization and the assessor <u>no later</u> than seven <b>business</b>	
day	s prior to my scheduled hearing. (RCW 84.40.038)	
Ī	My petition is complete. I have provided all the documentary evidence which I intend to submit and I request a hearing before the	
	ard of Equalization as soon as possible.	
I h	ereby certify I have read this Petition and that it is true and correct to the best of my knowledge.	
Sig	nedday of,(year)	
	SIGNATURE OF TAXPAYER OR AGENT PRINT NAME/TITLE	
<del>-</del>	ower of Attorney: If power of attorney has been given, the taxpayer must so indicate by signing the statement below or attaching a	
	ned power of attorney.	
5.6	ted power of accorney.	
	The person whose name appears as authorized agent has full authority to act on my behalf on all matters pertaining to this appeal.	
	Signature of Petitioner (Taxpayer)	
	DOCUMENTARY EVIDENCE WORKSHEET	
Mo	st recent sales of comparable property (within the past 5 years):	
	Parcel No. Address Land Size Sale Price Date of Sale	
<b>A-</b> 1		
A-3		
A-4		
	ormation regarding sales of comparable properties may be obtained through personal research, local realtors, appraisers, or at the	
cou	nty assessor's office: 1300 Franklin Street, Vancouver WA. Monday - Friday 9 AM -5 PM.	
<b></b>		
	inquire about the availability of this document in an alternate format for the visually impaired or a language other than English,	
	ase call V(360) 397-2025;TTY (360) 397-2445; ADA @clark.wa.gov. You may also access tax information on the Washington State	
De]	ot. of Revenue Internet home page at http://www.dor.wa.gov	